



Easing the Trauma of Faculty Suicide: the Use of a Crisis Protocol in an Academic Medical Center

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THE UNIVERSITY OF TEXAS

MDAnderson
Cancer Center

Making Cancer History®

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UT MD Anderson Cancer Center



About MD Anderson

- Large tertiary care comprehensive cancer center – Houston, Texas
- Part of the largest medical center in the world
- 19,290 employees
- 26,700 admissions per year
- > 1.28 million outpatient visits

MD Anderson Faculty



- **1644 faculty in 2012**
- **Gender: 1/3 female, 2/3 male**
- **Cosmopolitan, many different countries of origin**

Faculty Stressors

- MD Anderson faculty are representative of US academic medical faculty
- Challenges
 - Burnout
 - Loss of meaning in the practice of medicine
 - Challenges of increasing clinical work, decreasing research funding, multiple time demands

Origin of the Response Protocol

- **Fall of 1999: suicide of a prominent faculty surgeon**
- **Unanticipated**
- **Colleagues aware of high job stress**
- **No known history of mental illness**

Faculty Suicide - Aftermath

- **No official announcement of death**
- **Department head called patients to communicate the tragedy**
- **No institutional acknowledgement of suicide as the manner of death**
- **Perception that the department received no support from Cancer Center executives**

Outcomes

- **Anger and indignation**
- **New urgency to address faculty health**
- **Strong support from senior leaders**
- **Creation of a Faculty Health Committee**
 - **Prevention**
 - **Intervention**
 - **Response**

The Response Protocol

- **A blueprint of what to do after a faculty death**
- **Aim: reduce the stress on affected faculty, staff and patients**
- **Standardizes a dignified, appropriate and effective set of responses**
- **Addresses initial response, notifications, grief counseling, administrative actions, and memorials**

Parts of the Protocol – Initial Response

- **Small group is convened with a response leader**
- **Initial response and fact-finding**
 - **Early notification of executives**
 - **Gathers facts from reporting individuals, family, official and informal sources**

Protocol: Notifications

Staff:

- **Faculty directly affected by news**
- **Faculty community**
- **Chair of faculty spouses organization**
- **Other employees**

Patients:

- **Notified by phone and by letter;
appointments rescheduled**

Protocol: Grief Counseling

- Spouse/partner and family
- Faculty
- Other coworkers
- Patients



**Services are provided jointly by
Chaplaincy and the Employee Assistance
Program**

Protocol: Administrative Actions

- Cancellation or reassignment of professional commitments
- Notification of internal departments: benefits, payroll, information systems, research administration, others
- Other help for the work area



Protocol: Memorial Services

- Usually 4- 6 weeks after a death
- With help from communications department, colleagues, coworkers and family
- Active family involvement helps to heal



Oversight

- **Response leader/co-leader**
- **Office of the Provost or Physician-in-Chief**
- **Faculty Health Committee**

Use of the Protocol in 2010

Faculty suicide: anesthesiologist

- Department head found the faculty member at his home
- Unusual level of emotional involvement by department head and other colleagues
- Long history of mental illness
- Exceptionally candid and supportive family

Emotional Dilemmas



- Should an institution include manner of death in written communications?
- Should the family's wishes decide this question?
- Are we enhancing the stigma of mental illness by avoiding disclosure of the fact of a suicide?

IN MEMORY OF



Joseph Chao Ting, D.O.

Department of Pain Medicine

04/3/1973 - 08/27/2010

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Lessons Learned

- The response leader needs a co-chair
- An e-mail distribution list or a Sharepoint site would help coordinate team communications
- A physical command location is helpful
- Communications to patients should come from clinicians



The MD Anderson Experience

- The use of a response protocol is welcomed in the aftermath of a traumatic faculty death
- Protocols free affected individuals from bureaucratic details and enable everyone to stay emotionally present in their grief
- Families have played an important role in guiding the content of our messages



Ellen's Orchids